	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary Pa	ile(s) the	FOR LINE NUMBER: PAGE 90 OF 129 (check only one) X 17
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Roskam for Congress Committee			
٩.	Full Name (Last, First, Middle Initial) SCM Associates, Inc. Mailing Address P.O. Box 254 City State Dublin NH Purpose of Disbursement direct mail services Candidate Name Office Sought: House Disbursement For Senate Primary President State: District:	r: General	Category/ Type	Date of Disbursement M M / D D / Y Y Y Y O3 10 2016 Amount of Each Disbursement this Period 1137.76 Memo Item Transaction ID: B0AEE4A68DF43454EBF4
3.	Full Name (Last, First, Middle Initial) ComEd Mailing Address P. O. Box 6111			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Carol Stream IL Purpose of Disbursement utilities Candidate Name Office Sought: House Senate Primary Other (state: District:	r: General	001 Category/ Type	Amount of Each Disbursement this Period 82.27 Memo Item Transaction ID: BEBCE417332DB477BB1F
Э.	Arena Communications Mailing Address 1780 Sequoia Vista Circle			Date of Disbursement M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
•		r: General	Category/ Type	Amount of Each Disbursement this Period 1595.00 Memo Item Transaction ID: B213036373A9644279B2
SUBTOTAL of Disbursements This Page (optional)				

TOTAL This Period (last page this line number only).....